

**REQUEST FOR INFORMATION (RFI)**  
**VA-251-12-B-0122**

PROJECT NUMBER:	515-12-109	<b>Please ensure that before submitting questions or requests for clarification that you thoroughly read the solicitation, specifications, drawings and other pertinent documents. When submitting questions on this project the Government requires contractors to specifically identify the specification and/or solicitation section(s) or drawing number(s) in reference to the question or request for clarification submitted. No question or request for clarification will be answered by the Government unless the above requirements are met. Failure to comply may prevent the Government from responding in a timely manner.</b>	
PROJECT TITLE:	Medical Gas System Upgrade		
PROJECT LOCATION:	Department of Veterans Affairs Battle Creek VA Medical Center 5500 Armstrong Road Battle Creek, MI 49037		
SUBMITTED BY:	N/A	City/State:	N/A
PHONE NO.:	N/A		

**TO:**

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<b>RFI NO.: 1</b>	<b>DATE: 6/4/12</b>	<b>SPEC/DWG. REFERENCE:</b>
<b>REPLY NEEDED BY:</b> 6-5-12		

**INFORMATION NEEDED:**

**Medical Gas Wiring (MGW)**

1. The manholes that are to be used for the Master Alarm wiring were not accessible during the walk through. Is the Government or the contractor responsible for unforeseen conditions regarding the manholes and/or the conduit between them?
2. NFPA 70 and/or NFPA 99 do not require the medical gas Master Alarm wiring to be in conduit. The VA Master Spec does; see example 22 63 00 / 2.10 Alarms /A.; is the new alarm wiring to be installed in conduit?
3. There is a concern about the distance for the wire pulls. In the past, we have used VA Master Spec 2710 00 / 2.2 Communication and Signal Wiring / A., to go by the manufactures spec. For this job, the distances could be outside of the manufacturer's recommendations. Will the Government be providing an engineered wiring spec?
4. The Master Alarm Panel in the Plant has wire connected to jumped-out signals. Does the scope include the tracing and removal of that wire?
5. There are places that abandoned signal wire for the medical gas system remains. Does the scope include removal of the abandoned wire?
6. NFPA 99 calls out specific sources (Essential Electrical System and Emergency Electrical System) for line voltage power to sensors, equipment and alarms, If it becomes necessary to connect to these systems, if power

is not supplied from them, who is responsible for this work, and if it is the contractors responsibility, would it become an extra or at change order?

#### **Medical Gas Signals (MGS)**

1. Under Section 01 00 00/ 1.2 Statement of Bid Item(s) /A, Bulk Oxygen System. / a., the locations suggested do not comply with either NFPA 99, 2005, NFPA 99, 2012 or the VA Master Spec 22 63 OG. Does the Government intend to use these locations, regardless of such noncompliance?
2. If Building #84 is actually at separate structure from Building # 83 then it should have its own Mainline Valve with O<sub>2</sub> high/low line sensors and gauge. Are the buildings separate, ` and if so, does Building # 84 need an O<sub>2</sub> Mainline Valve, O<sub>2</sub> High/Low line pressure switch, and a gauge?
3. If the Area Alarm sensors and/or transducers are not in the correct locations as per NFPA 99, would there be an extra or at change order to move them; or would the Government accept their locations as is?

#### **Medical Gas Master Alarm Panels (MAP)**

1. Are there only to be the two Master Alarm Panels as per the spec Section 01 00 00?

#### **Medical Gas Combo Alarm Panels (CAP)**

1. If there are only to be two Master Alarm Panels, what does the Government propose to do with the two Combo Panels in Building #82 and Building #83? Please note: at Combo panel V is both an Area Alarm Panel and a Master Alarm Panel.
2. If the Combo Panels remain, will they be required to monitor all the Master Alarm signals as per NFPA99?

#### **Medical Gas Area Alarm Panels (AAP)**

1. If the Combo Panels are not to be wired as Master Alarm Panels in Building #82 and #83, are they to be replaced with Area Alarm Panels only?

#### **Medical Gas Local Alarm Signals (LAS)**

1. Is it the Governments intention to rework the existing equipments control panels to the VA Master Spec and NFPA 99 (Section 01 00 00 General Requirements! 1.2 / B.— F.)?
2. If the above question is answered in the affirmative, would the three vacuum systems (one in Building # 2, two in Building # 82) need PLC's as per Section 22 62 00 / Vacuum Systems for Laboratory and Healthcare Facilities / 2.14 Vacuum Pump Systems / G. Programmable Logic Controllers?

#### **Medical Gas Equipment (MGE)**

1. If the Medical Gas Vacuum Systems and Medical Gas Air Compressors did not meet either the current or previous (15491 Medical Gas and Vacuum Systems) VA Master Specs is it the Government's intention to try and make the Control Panels conform only to NFPA 99?
2. If the current Medical Gas Vacuum and Air Compressor systems as described in Section 01 00 00 (even with altered Control Panels) do not meet NFPA 99, is the Government going to accept them as Medical Gas Systems?

#### **VAMC General Intention (GI)**

1. Is it the Government's intention to have ASSE 6010 Medical Gas Installers who are certified brazers to install any of the medical gas pipeline or make any adjustments to the Medical gas pipeline?
2. Is it the Governments intention to have ASSE 6010 Medical Gas installers and/or ASSE 6040 Medical Gas Maintenance work on the medical gas systems that are not related to the Medical gas pipeline?
3. There were areas that had Medical Gases that were not part of the walk through; if during the verification of the Medical Gas Master Alarm Panels these areas have deficiencies that are uncovered: who is responsible for correcting them?
4. Some of the deficiencies that are not part of the scope of work would be considered life safety issues; if life safety issues were uncovered, who is responsible for them?
5. Prior to adding any new pipeline sensors, valves or gas specific fittings, should the contractor/3rd party verifier perform the pre-construction/pre-tie in tests as listed in VA Master Spec 22 63 00/ 3.3 Connection to Existing Laboratory Gas System A. — J.?
6. Is it the Governments intention for the contractor to hire an independent 3rd party ASSE 6030 Verifier as per

NFPA 99 and VA Master Spec?

7. Will the Government accept RFQ's that exceed the stated dollar range for the project?

**REPLY:**

**Medical Gas Wiring (MGW)**

1. Question assumes non-compliance that has not been cited in previous inspections. Unforeseen or differing conditions are addressed during construction as contract modification requests.
2. VA specifications are to be followed.
3. No, the Contractor is responsible for selecting a supplier that can meet the specification requirements.
4. No.
5. No.
6. Unforeseen or differing conditions are addressed during construction as contract modification requests.

**Medical Gas Signals (MGS)**

1. Question assumes non-compliance that has not been cited in previous inspections. Unforeseen or differing conditions are addressed during construction as contract modification requests.
2. No.
3. Unforeseen or differing conditions are addressed during construction as contract modification requests.

**Medical Gas Master Alarm Panels (MAP)**

1. Yes.

**Medical Gas Combo Alarm Panels (CAP)**

1. The VA proposes no changes to the alarm panels beyond what is identified in the Statement of Bid Items.
2. No, the VA proposes no changes to the alarm panels beyond what is identified in the Statement of Bid Items.

**Medical Gas Area Alarm Panels (AAP)**

1. No, the VA proposes no changes to the area alarm panels beyond the Statement of Bid Items.

**Medical Gas Local Alarm Signals (LAS)**

1. The Statement of Bid Items already indicates the work required to modify the existing panels.
2. It appears the answer is no. However, unforeseen or differing conditions are addressed during construction as contract modification requests.

**Medical Gas Equipment (MGE)**

1. Unforeseen or differing conditions are addressed during construction as contract modification requests.
2. Question is not relevant to the scope of the project.

**VAMC General Intention (GI)**

1. It is the contractor's responsibility to utilize qualified and experienced personnel or subcontractors to accomplish the work.
2. It is the contractor's responsibility to utilize qualified and experienced personnel or subcontractors to accomplish the work.
3. Unforeseen or differing conditions are addressed during construction as contract modification requests.
4. Question is speculative and assumes non-compliance in areas outside the scope of work identified in the Statement of Bid Items. No response is required or offered.
5. Unless specifically stated otherwise in the bid package, contractor is responsible for properly conducting all required testing.
6. Yes, contractor is to be responsible for costs of required testing.
7. No response is required or offered.

REPLY FROM:  
George A. Granger III, COR

DATE: 6-4-12

ATTACHMENTS:

COPY TO: